## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

schedule E)		PAGE 1 OF 4 FOR SE OF FORM 24/48		
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
Freedom Partners Action Fund, Inc.				
		C C00564765		
heck if 24-hour report X 48-hour report	New report Amends report	t filed on		
Full Name of Payee FREEDOM PARTNERS CHAMBER OF	COMMERCE, INC.	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 2200 WILSON BLVD.				
STE. 102-533		Amount		
City State	Zip Code	1200.00		
ARLINGTON VA	22201	Transaction ID : SE24.672 Date of Disbursement or Obligation		
Purpose of Expenditure RADIO MEDIA PRODUCTION	Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	Support	Office Sought: House District:		
TED STRICKLAND	Oppose	President Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2016 Other (specify) ▶		
Full Name of Payee	<u>'</u>	Date of Public Distribution/Dissemination		
FREEDOM PARTNERS CHAMBER OF CO	MMERCE, INC.	06 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 2200 WILSON BLVD.				
STE. 102-533		Amount		
City State	Zip Code	5000.00		
ARLINGTON VA	22201	Transaction ID : SE24.673  Date of Disbursement or Obligation		
Purpose of Expenditure DIGITAL MEDIA PRODUCTION	Category/ Type	M 06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	Support	Office Sought: House District:		
TED STRICKLAND	X Oppose	President X Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought	3752131.91	Disbursement For: Primary		
,	,	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		6200.00		
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>•</b>		
(c) TOTAL Independent Expenditures		<b>•</b>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	[Electronically Filed] Date	06 10 / Y Y Y Y Y		
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	<b>L</b> /(1 = 1,15)	1101120		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.				C C00564765
				0,
Check if 24-hour report X 48-hour report	New repo	oort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee 1360			Date	of Public Distribution/Dissemination
				06 09 / 2016
Mailing Address PO BOX 37046			Amou	unt
City	State	Zip Code	$ \Gamma$	10746.00
BALTIMORE	MD	21297		saction ID : SE24.670 of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - RADIO		Category/ Type		06 / 09 / 2016
Name of Federal Candidate		Support	Office Sough	ht: House District:
TED STRICKLAND		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		3752131.91	Disbursemer 2016	nt For: Primary X General  Other (specify) ▶
Full Name of Payee				of Public Distribution/Dissemination
1360			Г	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 37046			L	
			Amou	unt
<b>1</b> ′	State	Zip Code		10000.00
BALTIMORE	MD	21297		action ID : SE24.671 of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - DIGITAL		Category/ Type		M 06
Name of Federal Candidate		Support	Office Sough	ht: House District:
TED STRICKLAND		X Oppose	Presid	dent X Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		3752131.91	Disbursemer 2016	ont For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures.			▶	20746.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(c) TOTAL Independent Expenditures				7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Thomas F. Maxwell III	[Electron	nically Filed] Date	e 06	10 2016
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.	C C00564765
Check if 24-hour report X 48-hour report New report Amends report file	ed on
Full Name of Payee FACEBOOK, INC.	Date of Public Distribution/Dissemination
Mailing Address 1601 WILLOW ROAD	06 09 2016 Amount
City State Zip Code	200.00
MENLO PARK CA 94025	Transaction ID : SE24.001 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - DIGITAL (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Off	ice Sought: House District:
TED STRICKLAND Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought  Dis 201	bursement For: Primary General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
GOOGLE	06 09 2016
Mailing Address 1600 AMPHITHEATRE PARKWAY	Amount
City State Zip Code	100.00
MOUNTAIN VIEW CA 94043	Transaction ID : SE24.002  Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - DIGITAL (Estimate)  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Off	fice Sought: House District:
TED STRICKLAND Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought  Dis 20	sbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
•	7 7 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
[Electronically Filed] Date	06 10 2016
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.	
	, 655551165
Check if 24-hour report  48-hour report  New report  Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee Date of P	Public Distribution/Dissemination
TWITTER INC.	
Mailing Address 1355 MARKET STREET  Amount	
STE. 900	
City State Zip Code	200.00
***************************************	ion ID : SE24.003 Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - DIGITAL (Estimate)  Category/ Type	
Name of Federal Candidate Support Office Sought:	House District:
TED STRICKLAND    Oppose   President	Senate State: OH
Calendar Year-To-Date Disbursement Fo	
Per Election for Office Sought 3752131.91 2016 Other	r (specify) ▶
Full Name of Payee Date of F	Public Distribution/Dissemination
M -	M / D D / Y Y Y Y
Mailing Address	التنبيا لينا ل
Amount	
City State Zip Code	
Date of D	Disbursement or Obligation
Purpose of Expenditure Category/	M / D D / Y Y Y Y
Type	_
Name of Federal Candidate Support Office Sought:	House District:
Oppose President	Senate State:
Calendar Year-To-Date Disbursement Fo	or: Primary General
Per Election for Office Sought Othe	er (specify)
<u> </u>	
(a) SUBTOTAL of Itemized Independent Expenditures	200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	4
(c) TOTAL Independent Expenditures	
(c) TOTAL independent expenditures	27446.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coop with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
(F) 4 ' 11 F) 11	10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	2010